

Exhibit A

1 IN THE UNITED STATES BANKRUPTCY COURT
2 FOR THE NORTHERN DISTRICT OF IOWA

3 Case No. 23-00623 (TJC)

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7 IN RE: :
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8 MERCY HOSPITAL, IOWA CITY, IOWA, et al., :
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9 Debtors. :
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14 DEPOSITION UNDER ORAL EXAMINATION OF:
15 NARENDRA GANTI
November 4, 2023
16 -----

15 REPORTED BY: JENNIFER L. WIELAGE, CCR, RPR, CRR
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22 JOB # 24255
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1 TRANSCRIPT of the remote deposition of the
2 above-named witness, called for Oral Examination in
3 the above-entitled matter, said deposition being
4 taken pursuant to Federal Court Rules, by and before
5 JENNIFER L. WIELAGE, Certified Shorthand Reporter and
6 Notary Public, License No. XI01916, on Saturday,
7 November 4, 2023, commencing at 3:30 in the forenoon.

A P P E A R A N C E S:

MINTZ, LEVIN, COHN, FERRIS
919 Third Avenue
New York, New York 10022
(212) 935-3000

BY: KAITLIN R. WALSH, ESQ.

krwalsh@mintz.com

BY: NATHAN COCO, ESQ.

ncoco@mintz.com

Attorneys for Computershare Trust Company, Preston
Hollow Capital

SILLS CUMMIS & GROSS, P.C.

One Riverfront Plaza
Newark, New Jersey 07102
(973) 643-7000

BY: ANDREW SHERMAN, ESQ.

asherman@sillscummis.com

BY: BORIS MANKOVETSKY, ESQ.

bmankovetsky@sillscummis.com

Attorneys for Creditors Committee

MCDERMOTT WILL & EMERY

333 SE 2nd Avenue
Suite 4500
Miami, FL 33131-2184

(305) 358 3500

BY: BENJAMIN C, ESQ.

bpaulsen@mwe.com

Attorneys for Mercy Hospital

ALSO PRESENT - JAMES JARMON, Videographer

I N D E X

W I T N E S S

Testimony of:

NARENDRA GANTI

PAGE NO.

EXAMINATION BY MS. WALSH:

6

E X H I B I T S

NUMBER

DESCRIPTION

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Notice of Deposition

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Exhibit 2

Objection of the
Unsecured Creditor's
Committee to the
Proposed Final Cash
Collateral Order

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Exhibit 3

Declaration

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Exhibit 4

Email

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PREVIOUSLY MARKED EXHIBITS

NUMBER

DESCRIPTION

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DIRECTION TO WITNESS NOT TO ANSWER

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REQUEST FOR PRODUCTION OF DOCUMENTS

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QUESTION MARKED

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1
2 MS. WALSH: We'd like the rough as
3 soon as possible and then the final as soon as
4 possible, too, please.

5 MR. SHERMAN: Similarly, if we can
6 get the rough also.

7 THE REPORTER: And the final as soon
8 as possible?

9 MR. SHERMAN: Yes.

10 MR. PAULSEN: Yeah, I think us as
11 well, as soon as possible. Everyone, everyone wants
12 this transcript.

13 THE REPORTER: Do all counsel agree
14 to the remote swearing in of the witness?

15 MS. WALSH: Yes.

16 MR. SHERMAN: Yes.

17 MR. PAULSEN: Yes.

18 NARENDRA GANTI, FTI, 8251 Greensboro Drive, Suite
19 400, McLean, VA 22102, having been first duly sworn
20 according to law, testifies as follows:

21 EXAMINATION BY MR. WALSH:

22 Q. Good afternoon. My name is Kaitlyn
23 Walsh. I represent ComputerShare Trust Company NA as
24 Master Trustee and Preston Hollow Community Capital
25 Inc. as bondholder representatives in this matter.

1 Collectively, we refer to ourselves as the Secured
2 Bondholder Representatives.

3 Can you please state your full name
4 for the record?

5 A. Narendra Ganti.

6 Q. Have you been deposed before,
7 Mr. Ganti?

8 A. Yes.

9 Q. So I know we have limited time here
10 today, so I won't waste time going through the normal
11 rules of the road, but just at a high level, you
12 understand that you need to answer audibly as there's
13 a court reporter here, right?

14 A. Yes.

15 Q. And to the extent you don't
16 understand any of my questions, please just let me
17 know and I will rephrase them. Okay?

18 A. Yes.

19 Q. And unless your attorney instructs
20 you not to answer -- and if you understand my
21 questions, you're required to answer my question.

22 Do you understand that?

23 A. Yes.

24 Q. Okay. Are you aware of anything that
25 could impact your ability to testify truthfully

1 today, Mr. Ganti?

2 A. No.

3 Q. Have you taken any medication that
4 could impede your ability to testify?

5 A. No.

6 MS. WALSH: James, can we please pull
7 up Exhibit 1 and I'd like to mark this as Exhibit 1?

8 (Exhibit 1, Notice of Deposition, was
9 marked for Identification by the court
10 reporter.)

11 MS. WALSH: And this is the Notice of
12 Deposition.

13 BY MS. WALSH:

14 Q. Mr. Ganti, have you seen this before?

15 A. Yes, last -- yesterday afternoon, I
16 believe. Well, I have an earlier version. I have
17 the one that says noon, but yes.

18 Q. And you understand that you're here
19 providing testimony in connection with this Notice of
20 Deposition, correct?

21 A. Correct.

22 Q. And you are here providing testimony
23 in support of the committee's objection to the entry
24 of the Debtor's final cash collateral order, correct?

25 A. Correct.

1 MS. WALSH: We can take this down,
2 please. Can we please pull up Exhibit No. 2 and I'd
3 like to mark it as Exhibit No. 2 as well, please.

4 (Exhibit 2, Objection of the
5 Unsecured Creditor's Committee to the
6 Proposed Final Cash Collateral Order, was
7 marked for Identification by the court
8 reporter.)

9 BY MS. WALSH:

10 Q. And Mr. Ganti, can you see that on
11 the screen?

12 A. Yes.

13 Q. And that is the Objection of the
14 Unsecured Creditor's Committee to the Proposed Final
15 Cash Collateral Order, correct?

16 A. Correct.

17 Q. And have you seen this document
18 before?

19 A. Yes, I have.

20 Q. Were you involved in the preparation
21 of this document?

22 A. Somewhat.

23 MR. SHERMAN: I object only to the
24 extent that -- to the extent you're asking for
25 attorney-client work product, but only to the extent

1 that the witness can answer without divulging any
2 work product or privileged information.

3 A. Well, there's a declaration of mine
4 at the end of this document, 448, so I was involved
5 in that.

6 BY MS. WALSH:

7 Q. Okay.

8 MS. WALSH: Let's turn to page 4 of
9 this document, please. And I'm interested in the
10 chart.

11 A. Yes.

12 Q. Thank you.

13 Mr. Ganti, were you involved in
14 putting this chart together?

15 A. No, I was not.

16 Q. Do you know what this chart is?

17 A. I do, yes.

18 Q. What is this chart?

19 A. It's an analysis of accounts
20 receivable at Mercy Hospital and Mercy Clinics at
21 several points in time; one is at the petition date,
22 which is 8/7/2023. The other is at the end of
23 August, 8/31. Then at the end of the September and
24 at the end of October; the most recent one there.

25 Q. And you testified that you did not

1 put this chart together, correct?

2 A. Correct.

3 Q. Did anyone at FTI put this chart
4 together?

5 A. No.

6 Q. Do you know who put the chart
7 together?

8 A. Well, can I ask a clarifying
9 question?

10 Q. Certainly.

11 A. Are you talking about just the
12 physical aspect of putting something in a document or
13 actually the -- where the numbers came from?

14 Q. I'm interested in where the numbers
15 came from --

16 A. Okay.

17 Q. -- that comprise the chart?

18 A. Well, where the numbers came from, it
19 came from the Debtors and specifically their
20 restructuring advisors at ToneyKorff. So we received
21 this chart from Jim Porter, who is at ToneyKorff and
22 he's also the CFO of Mercy.

23 MS. WALSH: Can we please take this
24 document down and pull Exhibit 3? And I'd like to
25 mark it -- I think it's Tab 3 and I'd like to mark it

1 as Exhibit 3, please.

2 (Exhibit 3, Declaration, was marked
3 for Identification by the court reporter.)

4 BY MS. WALSH:

5 Q. And Mr. Ganti, do you see this
6 document on your screen?

7 A. Yes.

8 Q. And is this the declaration -- as far
9 as you can tell from seeing the first page, is this
10 the declaration that you submitted in support of the
11 objection?

12 A. Yes.

13 Q. Can we please go down to Paragraph 8
14 of this document?

15 And you see there, Mr. Ganti, in the
16 first line, it reads: Second, between the Petition
17 Date and October 31, 2023, Mercy Hospital's total
18 accounts receivable balance declined by only
19 approximately \$496,000.

20 And then in parenthetical, 23,714,184
21 minus 23 thousand 218,077.

22 MR. SHERMAN: Objection. Kaitlyn, I
23 think you meant 23,218,077.

24 MS. WALSH: I certainly did. I'm
25 sorry if I misstated.

1 BY MS. WALSH:

2 Q. So for clarity of the record, the
3 numbers that I'm referring to are in the
4 parenthetical in the second line of Paragraph 8 of
5 your declaration, the 23,714,184.

6 Where did that number come from?

7 A. It came from the same analysis
8 prepared by ToneyKorff and from books and records of
9 the Debtors.

10 Q. So let's break that down. So did
11 that come -- did that come from ToneyKorff directly?

12 A. Well, they're the ones who sent us
13 the -- sent us and others, sent FTI, excuse me, and
14 others, that spreadsheet that summarized the accounts
15 receivable which you showed on the previous exhibit,
16 whatever that exhibit was.

17 Q. Okay. So when you say it came from
18 the Debtor's books and records, is that based on an
19 assumption?

20 A. Yes.

21 Q. But so from your knowledge, the
22 23,714,000 number, that approximate number, that is
23 the amount of the pre-petition AR according to
24 ToneyKorff, correct?

25 A. From the spreadsheet that they sent

1 us of accounts receivable, yes.

2 Q. Okay. And that was the spreadsheet
3 that we just looked at in the prior exhibit, in
4 Exhibit 2, correct?

5 A. Correct.

6 Q. Do you have any further information
7 regarding the source of this number, other than it
8 came --

9 A. No, I haven't gone back --

10 THE VIDEOGRAPHER: Ms. Walsh froze.

11 (A discussion was held off the
12 record.)

13 MS. WALSH: Jennifer, can you please
14 read back the last question? I don't remember where
15 I was exactly.

16 (Designated question was read back.)

17 BY MS. WALSH:

18 Q. So referring to the \$23.7 million
19 pre-petition AR number, do you have any further --
20 any other information regarding the source other than
21 it came from the Debtors?

22 A. No, no.

23 Q. Do you know if it is a gross or a net
24 balance?

25 A. It's a net balance by the hospital

1 and clinics.

2 Q. Were there any adjustment -- so to
3 get to that net balance, were there any adjustments
4 made to get to that number?

5 A. Yes. There were adjustments to get
6 from the gross AR to the number you were just
7 referring to in that number, yes.

8 Q. What were the adjustments that were
9 made to get to the 23.7 net number?

10 A. Again, that was not done by FTI. It
11 was done by the Debtors. So they adjusted based
12 on -- I'm assuming historical collections of gross AR
13 to get to that AR, so they adjust that to get to the
14 net AR.

15 Q. So you don't have any knowledge about
16 what adjustments were made to get to that net
17 knowledge; is that correct -- withdrawn.

18 You don't have any knowledge
19 regarding what adjustments were made to get to that
20 net number, correct?

21 A. Correct.

22 Q. And is it correct -- withdrawn.

23 And do you have any knowledge as to
24 why those adjustments were made?

25 A. Well, generally, the --

1 MR. SHERMAN: Objection to form. I'm
2 not sure how somebody can even answer that question.

3 BY MS. WALSH:

4 Q. Okay. So is it fair to say that
5 since you don't have any knowledge about what
6 adjustments were made, you don't have any knowledge
7 about why those adjustments were made?

8 MR. SHERMAN: Objection to form.

9 BY MS. WALSH:

10 Q. Do you understand the question?

11 MR. SHERMAN: I don't understand the
12 question. I don't know how the witness can
13 understand the question.

14 MS. WALSH: Well, I didn't ask you,
15 Mr. Sherman, whether or not you understand the
16 question. Your objection is on the record.

17 MR. SHERMAN: Thank you.

18 A. I'm -- repeat the question, please?

19 BY MS. WALSH:

20 Q. Sure. So I was just trying to
21 understand if you have any knowledge as to why the
22 Debtor made the adjustments that it did to the number
23 in order -- to the gross number in order to get to
24 the net number?

25 A. Well, in most healthcare cases,

1 there's -- both of the Debtors have kind of a rack
2 rate, a gross charge that they bill for services, but
3 then they negotiate discounts and other things with
4 insurance companies.

5 So the gross AR is based on their
6 rate and then they adjust it to get to what they can
7 bill the insurance company or Medicare and Medicaid.

8 So that's generally across the
9 healthcare industry. So I'm guessing this is what
10 they're doing here also.

11 Q. Okay. So you're making an
12 assumption?

13 A. Based on experience with other
14 healthcare entities, yes.

15 Q. Mr. Ganti, what have you done to
16 understand revenue cycle management at Mercy?

17 MR. SHERMAN: Objection to the form.
18 This is going far beyond the scope of what's in the
19 declaration. The declaration doesn't at all attest
20 to Mr. Ganti's knowledge of how the numbers. He just
21 said he received the numbers.

22 MS. WALSH: Mr. Ganti purports to
23 testify regarding the amount of accounts receivable
24 and is providing testimony regarding the change in
25 accounts receivable from pre-petition to

1 post-petition, so it is completely within the scope
2 of his Declaration as to the accounts receivable. I
3 know we have limited time today, so I don't know if
4 we should be getting into an argument about this at
5 this time, but, you know, it is absolutely clear from
6 the declaration that his testimony relates to
7 accounts receivable. So I'm asking him about his
8 knowledge on accounts receivable about which he
9 purports to provide testimony in this declaration.

10 MR. SHERMAN: And the testimony and
11 what's in his declaration is the receivables as
12 reported to him by the Debtor. So he's working with
13 the Debtor's numbers, so --

14 MS. WALSH: If that's the answer,
15 that's the answer. So I'm asking him has he done
16 anything to understand the revenue cycle management
17 at Mercy. If the answer is no, then that's fine.
18 And we'll move on.

19 THE DEPONENT: No, let's move on.

20 BY MS. WALSH:

21 Q. Let me just restate the question for
22 the record.

23 Have you done anything to understand
24 the revenue cycle management at Mercy?

25 A. No.

1 Q. Have you taken any steps to
2 understand the value of the AR at Mercy?

3 A. I don't know what that question
4 means.

5 Q. Have you done any independent
6 analysis of the numbers provided by the Debtor of the
7 AR?

8 A. Again, what -- I don't know what
9 analysis you're asking about. I mean that's a wide
10 range of stuff. I don't know what specific analysis
11 you're referring to.

12 Q. Do you know how Mercy accounts for
13 the treatment of gross billings to net accounts
14 receivables?

15 MR. SHERMAN: I think it's asked and
16 answered. Objection to the form.

17 A. I -- no, I don't.
18 BY MS. WALSH:

19 Q. And to clarify for the record, you
20 have not performed your own valuation of the Mercy
21 Hospital total accounts receivable, correct?

22 A. Again, when you say "valuation," I'm
23 not sure what you're referring to.

24 Q. Well, have you done -- have you
25 undertaken any analysis of the accounts receivable?

1 A. Again, you're asking a very
2 open-ended, wide question. I don't know -- I mean
3 I've looked at analysis, looked at the adjustments
4 they made to get from gross to net, compared it over
5 the -- what they've done the last few months to make
6 sure they haven't changed their assumptions and they
7 hadn't so I've looked at that. I looked at the aging
8 of it, of the AR, to see how it was aging. So I've
9 done things like that.

10 Q. Okay. Anything else?

11 A. I think that's -- yeah, that's it,
12 because I got this analysis, just like everyone else
13 did, two days ago.

14 Q. Who performs the revenue cycle
15 management functions at Mercy?

16 MR. PAULSEN: I'm going to -- I'll
17 jump in with an objection to form there.

18 A. I don't know. When you say "who,"
19 are you talking about a specific individual, the name
20 of an individual?

21 BY MS. WALSH:

22 Q. Well, are you aware that Revology is
23 an outsourced RCM provider?

24 A. My understanding is they're not
25 providing services to Mercy right now.

1 Q. And what is that understanding based
2 on?

3 A. Speaking with ToneyKorff.

4 Q. And as of when is your understanding
5 that Revology is no longer providing services?

6 A. I'm not sure.

7 Q. Are you aware of limitations in the
8 revenue cycle management process that may have a
9 material impact on collections of account receivable?

10 MR. SHERMAN: Objection to the form.

11 A. I don't understand the question.

12 BY MS. WALSH:

13 Q. Are you aware of challenges that were
14 faced by a hospital in managing accounts receivable
15 that may have a material impact on the ability to
16 collect?

17 MR. PAULSEN: Objection to form.

18 MR. SHERMAN: I will join that
19 objection as well.

20 Nar? Okay. You're still there.

21 THE DEPONENT: I thought you objected
22 to the question. Do I have to answer it?

23 MS. WALSH: Yes, sorry, unless you're
24 instructed not to answer, your counsel will object to
25 my questions and you can still answer.

1 A. Can you repeat the question again?

2 MS. WALSH: Jennifer, can you read
3 back the question, please?

4 (Designated question was read back.)

5 A. So you're talking about Mercy
6 specifically or hospitals in general?

7 BY MS. WALSH:

8 Q. Thank you for the clarification. I'm
9 speaking about hospitals in general and then I would
10 like to know about Mercy specifically.

11 A. Well, yes, most hospitals healthcare
12 entities have --

13 (A discussion was held off the
14 record.)

15 A. So, yes, so most hospitals and
16 healthcare entities have issues around when they file
17 claims, there's claims denial by the insurance, the
18 payers, there's issues with medical necessity. So
19 there's a whole process of filing claims with the
20 insurance companies and Medicare and Medicaid.

21 Sometimes, the claim and the payment
22 is denied for various reasons, whether it's medical
23 necessity, credentialing or any other myriad of
24 reasons that the insurance company might have an
25 issue with the procedure performed.

1 Q. And do you have any knowledge
2 regarding the particular circumstance at Mercy that
3 would be limitations that would have a material
4 impact on collections of accounts receivable?

5 A. No, I don't have any knowledge of any
6 impact on collections.

7 MS. WALSH: Can we please pull up
8 Exhibit 7 -- or, I think it's marked as Tab 7 and
9 then mark it as Exhibit 4.

10 (Exhibit 4, Email, was marked for
11 Identification by the court reporter.)

12 MR. SHERMAN: Kaitlyn, for the
13 record, these exhibits you're referring to, were they
14 circulated in advance? Because I haven't seen
15 anything you're marking as an exhibit other than
16 those three documents that were prior pleadings.

17 MS. WALSH: No, they were not
18 circulated in advance.

19 MR. SHERMAN: Okay.

20 BY MS. WALSH:

21 Q. And can we please scroll down -- now,
22 this is an email from -- well, let's scroll down a
23 little bit. I want to go down to an email from
24 September 29, 2023. Okay. So that right there is --
25 right here is perfect.

1 So Mr. Ganti, do you see -- now I
2 understand you have not seen this document before.
3 I'll represent to you that this is an email exchange
4 between BRG and Revology who was handling the RCM
5 process at Mercy.

6 MS. WALSH: And actually if we can
7 scroll down a little bit further, a little bit more.
8 I apologize. I lost my copy of this. Bear with me,
9 please. Let's scroll up a little bit more. I'm
10 looking for an email from Seth Calkins.

11 MR. SHERMAN: So the record is clear,
12 we object to the introduction of this document. You
13 can obviously question him about it if he knows
14 anything about him, and obviously we've never seen
15 this before either.

16 MR. PAULSEN: I join in that
17 objection. Also, Kaitlyn, this exhibit on the link
18 is coming up as just an email. Is there a way that
19 we can get the PDF uploaded for the exhibit link?

20 MS. WALSH: Yes.

21 MR. SHERMAN: Because it's not
22 opening on my computer.

23 MS. WALSH: Yeah.

24 THE VIDEOGRAPHER: Yeah, I can try to
25 convert it.

1 BY MS. WALSH:

2 Q. Okay. Can you scroll up a little bit
3 more? Keep going. It's a chart. Here it is. Here
4 it is. That's perfect. Mr. Ganti, recognizing --
5 I'm assuming you have not seen this document before,
6 correct?

7 A. Correct.

8 Q. So I just want to draw your attention
9 to the AR as of August 7th column here. And if you
10 look down at the bottom, it has a net AR balance of
11 35,004,325.

12 Do you see that?

13 A. Yes.

14 MS. WALSH: We'll scroll up just so
15 we can let Mr. Ganti see who this email is from,
16 please.

17 BY MS. WALSH:

18 Q. Okay. And do you see this is from
19 Mr. Calkins?

20 A. Uh-huh, yes.

21 Q. And do you know Mr. Calkins?

22 A. I do not.

23 Q. So I'll represent to you that he is
24 with Revology who was the RCM manager at Mercy.

25 Does it surprise you that they would

1 have a different number for the pre-petition AR than
2 what was provided by ToneyKorff?

3 MR. SHERMAN: Objection to the form.

4 MR. PAULSEN: Objection to the form.

5 A. Yeah, I don't know how Seth Calkins
6 is, but I'm also reading the email where he says:
7 Thanks for speaking with me. I walked through how we
8 could look at new charges since 8/7 and apply some
9 loose assumptions.

10 So I don't know what he did to get to
11 those numbers. But he applied some loose
12 assumptions.

13 BY MS. WALSH:

14 Q. So is it fair to say that there are
15 different ways to calculate AR as of a given point in
16 time?

17 MR. SHERMAN: Object to the form.

18 A. Sure, because Seth is using some
19 different assumptions. I don't know how valid they
20 are. And they tend to be loose -- the assumptions
21 don't seem to be based on anything because he said
22 they're loose assumptions.

23 So yeah, I'm sure he could get any
24 number he wants based on assumptions.

25 Q. But you don't have familiarity about

1 the assumptions applied by the Debtors, right?

2 MR. SHERMAN: Objection to form.

3 MR. PAULSEN: Objection.

4 A. Nope, not --

5 MR. SHERMAN: Object to form.

6 MS. WALSH: Can you please take this
7 document down?

8 BY MS. WALSH:

9 Q. Mr. Ganti, do you agree that the
10 Debtors collected approximately 40.4 million in net
11 patient receipts post-petition?

12 A. I agree that it's 40.4 from petition
13 date to the week ending October 27th, yes.

14 MS. WALSH: Can we please pull back
15 Exhibit 3? And can we please go to Paragraph 7?

16 BY MS. WALSH:

17 Q. I'd like to turn your attention to
18 the second sentence, Mr. Ganti, which states:
19 "Rather, the Debtor's cash position to the extent of
20 any possible degradation can be supported by funds
21 through the foundation settlement or investment
22 account as necessary."

23 Do you see that?

24 A. Yes.

25 Q. And can you explain that statement,

1 please?

2 A. Yeah, there's a -- another entity
3 Mercy Foundation which has assets, somewhere 17 or
4 \$18 million in unrestricted assets, temporarily
5 restricted and firmly restricted and there's a
6 settlement in place between I believe the Debtors,
7 the Committee, the Foundation and the Bondholders
8 that the Foundation would support the operations of
9 the Hospital by providing unrestricted assets that it
10 has. And they've already supported the Hospital by
11 providing \$2.2 million in cash.

12 Q. And do you understand that there's a
13 limit on this support that the Foundation will be
14 providing the Hospital?

15 A. I believe it's the amount of the
16 unrestricted cash is what they're going to support,
17 yes.

18 Q. And you mentioned the investment
19 account, as well, correct?

20 A. Yes. So when they filed, they had a
21 separate investment account that had about \$11.8
22 million in investments and that has been used also to
23 fund professional fees in the case so far.

24 Q. Do you know the aggregate amount of
25 funds withdrawn from the Debtors' investment account

1 from the petition date?

2 A. It's about \$5.3 million, give or
3 take.

4 Q. Is it your understanding that
5 approximately 3 million was paid to fund professional
6 fees before the investment account was assessed?

7 MR. SHERMAN: Objection to the form.

8 MS. WALSH: Withdrawn, please.

9 BY MS. WALSH:

10 Q. Is it your understanding that
11 approximately 3 million was paid to fund professional
12 fees before the investment account was accessed by
13 the Debtors?

14 MR. SHERMAN: Objection to the form.

15 A. I -- I'm not aware of that.

16 BY MS. WALSH:

17 Q. Do you know the aggregate amount of
18 funds that have been paid into the professional fee
19 reserve established under the interim cash collateral
20 order through October 31st?

21 A. No, it's through -- I only know
22 through October 27th from the budget to actual and I
23 believe it's somewhere around \$5.1 or 2 million.

24 Q. And where did those funds come from?

25 A. That came -- I believe that came from

1 the investment account because the investment account
2 went down about the same amount as the professional
3 fee reserve account.

4 Q. Okay. So -- and what do you base
5 that understanding on?

6 A. By looking at the cash flows provided
7 by ToneyKorff.

8 Q. In Paragraph 9 of your declaration,
9 if we could go down just a little bit, please.

10 In Paragraph 9 of your declaration,
11 you attest that you believe it is unlikely that the
12 Master Trustee's cash collateral will be material
13 depleted as the cases progress.

14 Correct?

15 A. Correct.

16 Q. On what do you base this belief of
17 unlikelihood of material depletion of the Trustee's
18 collateral?

19 A. Well, one there's going to be funds
20 coming in from the Foundation. The cash flow
21 forecast projects another \$4 and a half million
22 coming in the month of November, that's one. Second,
23 starting, I guess November 30 or December 1, whatever
24 that date is, the winning buyer, the University of
25 Iowa Hospital and Clinics has agreed to fund

1 operating losses of the Debtor going forward until I
2 believe end of January when they think they'll close
3 on the transaction. And there's also the
4 investment -- there's still -- I'd have to -- 11 and
5 -- somewhere around \$6 million or something --
6 somewhere in that in the investment account also that
7 can be used -- be used to fund professional fees.

8 Q. Have you reviewed the Debtors' cash
9 collateral budget in support of the final cash
10 collateral hearing?

11 A. I'm sorry. Repeat the question.

12 Q. Sure. Have you reviewed the Debtors'
13 cash collateral budget in support of the final cash
14 collateral order?

15 A. I was provided one -- a version of a
16 budget, yes.

17 Q. Are you aware that the Debtor has
18 forecast receipts to the client by more than 15%?

19 A. I am aware, yes.

20 Q. And if the Debtors correct that
21 there's a 15% decline in revenue, wouldn't that
22 impact the amount of the accounts receivable?

23 MR. SHERMAN: Objection as to form.

24 A. If the -- if it was actually going to
25 decline, it could have an impact, but I'm not sure,

1 but I don't believe it will decline, because they're
2 collecting cash from services provided at least 30
3 days ago and they haven't had any declination in any
4 collections over the last 12 weeks of the case
5 post-petition. They've been averaging \$3.4
6 million -- if you take the 40 million in receipts and
7 divide it by 12, you get about 3.4 million on average
8 per week of collections.

9 Now, there's some variations from
10 week to week. There's no reason why there should be
11 a decline of 15% over the next four weeks.

12 Q. If the Debtors are correct in
13 their --

14 A. I don't believe they're correct. So
15 I can't answer the question. I don't think they're
16 right. I don't know -- there's no reason why the
17 receipts should decline the last four weeks of when
18 they're responsible for funding losses.

19 Q. So isn't it possible then that the
20 Debtors' analysis of their pre -- the amount of their
21 pre-petition AR is also incorrect?

22 MR. PAULSEN: Objection to form.

23 MR. SHERMAN: Objection to the form.

24 A. One has nothing to do with the other.
25 One is just an assumption that they decided to take a

1 reduction to be conservative in projections.

2 BY MS. WALSH:

3 Q. But you testified that the Debtor
4 also applied a set of assumptions to go from a gross
5 number to a net number with respect to AR, correct?

6 MR. PAULSEN: Objection to form.

7 A. Correct.

8 MS. WALSH: I'm sorry. I couldn't
9 hear.

10 THE REPORTER: What was the answer?

11 A. That they did apply a factor to get
12 from gross to net, yes, they do.

13 BY MS. WALSH:

14 Q. So you're not challenging the
15 assumptions that the Debtor is an applying to their
16 AR analysis, but you are challenging their
17 assumptions that they're applying in their forecast
18 analysis, correct?

19 MR. PAULSEN: Objection to form.

20 MR. SHERMAN: Join in the objection.

21 A. I believe, based on what they've --
22 historical collections post-petition, they are being
23 conservative in their assumptions on cash collections
24 over the next couple of weeks, yes.

1 BY MS. WALSH:

2 Q. Also in that same paragraph 9 of your
3 declaration, you cite the -- the sale of the Debtors'
4 assets to the University as being a positive for the
5 hospital, correct?

6 A. Yes.

7 Q. And in fact, in Paragraph 10 of your
8 declaration, Romanette iii, you cite the expected
9 stability that the pending sale is likely to bring;
10 is that right?

11 A. Yes.

12 Q. On what do you base this belief of
13 the stability?

14 A. Well, one, the University is a much
15 larger institution with much more financial
16 resources. And then speaking with ToneyKorff,
17 there's been some uncertainty with the sale process
18 and they told us in our calls that some of the
19 employees were concerned that they weren't sure what
20 was going to happen to the hospital, whether it was
21 going to be bought by the bondholders, the University
22 or some other outcome. So this gives a certainty to
23 know that the University is a buyer. I believe at
24 the auction and maybe in the press I saw that Dave
25 Gordon, who represents the University for Polsinelli

1 said that there's going to be no change in head count
2 or any reductions in employment once the University
3 closes on the transaction and the University also
4 promised to invest \$25 million over the next five
5 years to help with capital expenditures and
6 technology improvement. So I believe those are all
7 positive steps in stabilizing the operations of Mercy
8 Hospital.

9 Q. Are you aware of the potential that
10 some doctors view the sale of the hospital to the
11 University as unfavorable and may threaten to leave?

12 MR. SHERMAN: Objection to the form.

13 MR. PAULSEN: Objection.

14 A. I have not spoken to any doctors.
15 No. I am not aware.

16 BY MS. WALSH:

17 Q. If the University were to not take
18 certain staff, what impact would that have on the
19 sale in your view?

20 MR. SHERMAN: Objection to the form.

21 MR. PAULSEN: Objection to form.

22 A. I have no idea. I don't know what
23 staff you're talking about. I don't know how I can
24 answer that question.

25 Q. Well, I'm trying to explore the

1 extent of your knowledge regarding the expected
2 stability that you're testifying about in Paragraph
3 10, so I just want to get an idea of whether, you
4 know, you have any information regarding, you know,
5 all the possible outcomes of this acquisition?

6 MR. SHERMAN: Objection. I don't
7 think -- is there a question in there? I didn't hear
8 a question.

9 A. I have not played out every outcome
10 if that's what you're asking. I don't know how I
11 could, but I have not.

12 BY MS. WALSH:

13 Q. But you have no way of knowing that
14 this transaction will actually lead to -- well,
15 withdrawn.

16 So do you have any way of knowing
17 whether this transaction will actually close?

18 MR. SHERMAN: Objection to the form.

19 A. I have -- no, it's -- no, I don't
20 know.

21 BY MS. WALSH:

22 Q. When you don't -- oh, withdrawn. I
23 apologize. I did not mean to speak over you.

24 A. No, I don't know.

25 Q. And you don't have any way of

1 knowing, with any degree of certainty, of what the
2 impact of this sale will be on the Hospital, right?

3 MR. SHERMAN: Objection to form.

4 MR. PAULSEN: I'll join in that
5 objection as well, sorry.

6 A. I know that this hospital has been --
7 has had been up for sale, if that's the right word,
8 for at least 18 months or longer or some transaction
9 that's been happening, so they've -- the staff and
10 management and employees and doctors and everyone
11 else have had uncertainty for the last two years. So
12 I think this finally brings some certainty, the fact
13 that they will be part of a much larger and more
14 financially viable entity than they have been for the
15 last two years as part of the process that the
16 Debtors' investment bankers have engaged in.

17 Q. In the last sentence of Paragraph 9,
18 you state that: "I believe it is unlikely that the
19 master Trustee's cash collateral will be material
20 depleted as these Chapter 11 cases progress."

21 Do you see that?

22 A. Yes.

23 MR. SHERMAN: I think the term is
24 "materially depleted," not "material depleted,"
25 that's in Paragraph 9.

1 BY MS. WALSH:

2 Q. And did you do any analysis to
3 determine the degree to which you believe the Master
4 Trustee's collateral may be depleted in these cases
5 going forward?

6 A. Well, the AR that was at petition
7 date to the end of October for the hospital only went
8 down by 500,000 and there hasn't been any significant
9 changes in census over the last two, three months.
10 So if the amount of AR only declined by 496,000, it's
11 less than -- it's probably about a percent and a half
12 of the pre-petition AR and there's been no change in
13 census. And we're also in the busy season for
14 healthcare with flu, RSV, Covid, all that stuff, the
15 normal stuff that happens during the winter months.
16 I don't anticipate anything materially happening in
17 the next four weeks.

18 MS. WALSH: Can we go off the record
19 for a moment, please?

20 (A brief recess was taken.)

21 BY MS. WALSH:

22 Q. One clarifying question. Mr. Ganti,
23 just to confirm a question that I believe that I
24 asked you already but just to confirm that I have it,
25 do you know the actual amount that was paid into the

1 professional fee reserve to date?

2 A. I believe it's about 5 --

3 MR. SHERMAN: Objection to the form.

4 A. I believe it's about \$5.1 million.

5 BY MS. WALSH:

6 Q. Mr. Ganti, based on the assumed
7 availability of the Foundation funds and the funds in
8 the investment account being available to the
9 Hospital, do you believe it is necessary for the
10 Debtors to continue to access the Trustee's cash
11 collateral?

12 MR. PAULSEN: Objection to form.

13 A. I'm not sure what you're asking.

14 BY MS. WALSH:

15 Q. Well, in your declaration and in your
16 testimony here today, we've talked quite a bit about
17 the availability of funds from the Foundation and
18 from the investment accounts, correct?

19 A. Correct.

20 Q. And so my question is: Given the
21 availability of those funds, is it necessary for the
22 Debtor to continue to have access to the Trustee's
23 cash collateral going forward?

24 MR. PAULSEN: Same objection.

25 MR. SHERMAN: Yeah, I join in the

1 objection.

2 A. One, the investment account is only
3 being used for professional fees, so it's not used to
4 help with the operations of the hospital and the
5 assets of the foundation will help with the
6 operations of the hospital. So I don't think that's
7 completely sufficient. I think the Debtors would
8 still need access to cash collateral.

9 MS. WALSH: Thank you very much,
10 Mr. Ganti. I really appreciate your time, especially
11 today, on a Saturday.

12 THE DEPONENT: I had nothing better
13 to do. This is fun. Just kidding.

14 (Deposition concluded at 4:31 p.m.)
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UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF IOWA

I, Jennifer L. Wielage, CCR No. 30X100191600,
Certified Court Reporter, certify:

That the foregoing proceedings were taken
before me at the time and place therein set forth, at
which time the witness was put under oath by me;

That the testimony of the witness, the
questions propounded, and all objections and
statements made at the time of the examination were
recorded stenographically by me and were thereafter
transcribed;

That a review of the transcript by the
deponent was not requested;

That the foregoing is a true and correct
transcript of my shorthand notes so taken.

I further certify that I am not a relative or
employee of any attorney of the parties, nor
financially interested in the action.

I declare under penalty of perjury under the
laws of Iowa that the foregoing is true and correct.

Dated this 4th day of November 2023.

Jennifer L. Wielage —

Jennifer L. Wielage, CCR, RPR, CRR

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\$23.7 (1)	31st (1)	accessed (1)	Attorneys (3)
\$25 (1)	33131-2184 (1)	account (13)	auction (1)
\$3.4 (1)	333 (1)	accounts (17)	audibly (1)
\$4 (1)	35,004,325 (1)	acquisition (1)	August (2)
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23,714,000 (1)	8/31 (1)	apply (2)	mmis.com (1)
23,714,184 (2)	8/7 (1)	applying (2)	bondholder (2)
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29 (1)	919 (1)	argument (1)	bought (1)
2nd (1)	935-3000 (1)	asherman@sillscummi	bpaulsen@mwe.com
< 3 >	973 (1)	s.com (1)	(1)
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krwalsh@mintz.com
(1)

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